

Mischievous Madness:

Proof that the Medical Profession is Controlled by Sociopaths

Jeremy James



A nest of vipers

The Covid program is an elaborate exercise in mass mind control. Even if one were to accept that an unpleasant virus is causing the premature deaths of a very small percentage of the population, mostly those in their eighties with one or two co-morbidities, the response by our governments has been grossly out of proportion to the magnitude of the threat to public health which the alleged virus is posing (or may have posed for six weeks in 2020).

Many born-again believers – who understand the nature of the New World Order – are aghast that a very large number of professing Christians accept without question the version of events given by our governments, our church leaders, and the medical profession.

An astonishing blindness

I have received a large number of emails over the past year from Christians who are troubled by this astonishing blindness. Despite their best efforts to get friends and family members to adopt a more sceptical or questioning attitude toward the ‘official’ line, they can get nowhere. One or two may listen for a while, but it doesn’t take long before the term ‘conspiracy theory’ falls like a rock from the sky and makes further constructive discussion impossible.

We know why the wicked are doing what they are doing. It actually makes sense. We might not like what they are doing, and we may not always know how they do it, but their overall plan is rational given their objectives. They want to own everything and control everyone. In order to do that they must secretly carry out a plan which amounts effectively to a double-cross.

Co-ordinated worldwide betrayal

We saw this stunning betrayal most clearly in March 2020 when nearly every country in the world put the same irrational, inhumane plan into motion. The governments of these countries could not have taken this highly destructive course of action – so rapidly and so decisively – unless they had already agreed well in advance to do so. If several countries stood back and kept their economies functioning normally, the whole world would have seen how pointless and how harmful the lockdown plan really was.

The governments of the world worked together deceitfully to implement at a moment's notice a common plan which had potentially devastating implications for the countries concerned. Never in history has such immediate, high-level co-operation been achieved between even a quarter of the countries of the world!



Lion cornered by a pack of hyenas.

We can see from this that the secret Communist world government is already operating from behind the scenes and has probably been in place for several decades.

When we can see that the world is already under de facto Communist rule, a lot of otherwise inexplicable events begin to make sense. We can see why politicians at the highest level, the police and the judiciary all seem to respond to a whistle that no-one else is able to hear. At the same time, the national media in each country ensure that any serious discussion of this invisible influence is carefully suppressed.

Communism is the conspiracy that no-one is allowed to mention, the real-life, in-your-face conspiracy that we have been repeatedly told does not exist. [For a taste of modern Communism in action see **Appendix B.**]

Web of lies

So, once we acknowledge their existence, step back, and look at what the wicked are actually doing, their malicious antics make sense. They use manipulation and deception on a massive scale to gull the unwary and draw the world as a whole into a web of lies.

The Christians who write to me are not confused by any of this. They know what's going on, to a greater or lesser degree. The problem that really bothers them is the obstinate refusal or inability of perfectly normal people to even consider the possibility that this is how the world now operates. This puzzling situation has existed since 2001, when a massive skyscraper in New York, with no structural damage, collapsed in free-fall in 10 seconds. The same normal people can look at a video of this event and still believe the official explanation (which is too idiotic to repeat here).



However, for the past year, our entire society has been in a similar kind of free-fall. Nothing struck it and no external danger threatened to undermine it, and yet the same normal people believed the official “viral pandemic” explanation. Apparently the only way to save our society – we were told – was to shut it down! Stop working, stay at home, stand apart, wash your hands, wear a mask ... and keep doing this until everything returns to normal!

Seemingly rational people believed this nonsense, and most continue to do so.

Their precarious grip on reality has been made even more apparent by the willingness of many – the vast majority – to receive a high risk, experimental vaccine which hasn't even been tested on animals. As the Word of God says:

“Though thou shouldest bray a fool in a mortar among wheat with a pestle, yet will not his foolishness depart from him.”

- Proverbs 27:22

How can we get past the mental censor?

So, what can Christians do? I am referring here to the ones who can see the hand of Satan in all of this – a very small minority. What can they say to their friends and loved ones that might shake them out of their complacency?

Rather than rehearse the material given in earlier papers, we could refer our readers to responsible websites dedicated to disseminating the truth about Covid – such as ***healthimpactnews.com***, or ***swprs.org*** or ***principia-scientific.com***. But these self-help options – which have excellent material – have had little effect to date, largely because no-one wants to invest time and effort investigating something they believe they already understand. Besides, the medical experts have gone over the evidence again and again and told us what we must do to survive.

An alternative approach, which I am suggesting in this paper, is to show that the medical profession – not the politicians or the pharmaceutical industry – is the group most responsible for this terrible crime against the community. So far they have escaped censure of any kind for their deceitful betrayal of the public trust and for their malicious disregard for the basic principle of their profession, namely, *First and foremost, do no harm*.



Bust of Hippocrates, Athens

There are a great many highly educated, well paid professional medical staff in the health sector in Ireland (for example), yet only a handful have questioned any aspect of the government’s handling of the alleged Covid ‘pandemic’. And by a handful we mean a number so small that it cannot be expressed as a percentage.

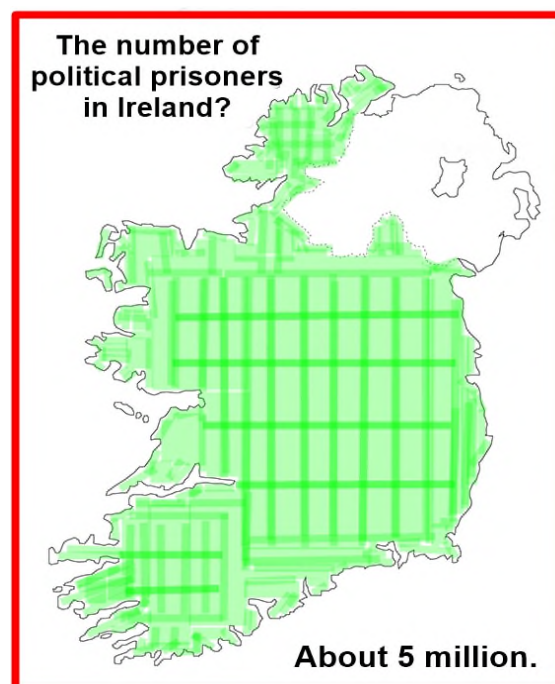
The mishmash of pseudo-science that has been used by the government to justify its draconian response has been allowed to pass without comment. Face masks offer no protection against a virus, but none of our medical professionals are prepared to state this openly. Face masks cause psychological harm to children, but this is ignored. Face masks can serve as an incubator for pathogens and a vector for infection. They reduce the intake of oxygen and impede the effective exhalation of carbon dioxide. They can also contain micro particles – such as graphene – which damage our lungs. Yet none of these highly controversial issues are addressed by our well-paid, highly qualified medical elite.

When we asked them to provide scientific evidence to substantiate the government's claim that face masks are both safe and effective, none of the state agencies responsible – the Health Service Executive, the Department of Health, the Health Information & Quality Authority, and the Health Products Regulatory Agency – were able to respond. They had no scientific proof!

Does this mean the public is being deliberately misled in this matter? Of course it does.

The science of tyranny

Many similar questions arise in relation to lockdowns, social distancing, and travel restrictions. None of the four bodies were able to provide a shred of peer-reviewed scientific evidence to show that such measures were effective in containing the spread of a viral pathogen or that the harm they caused was outweighed by any supposed benefits. The same bodies were asked to show that the Covid-19 virus had been isolated, but they were unable to supply any scientific evidence of this. They were also asked to show how supposed Covid variants were identified if the original virus had not been isolated. Again, the relevant requests under the Freedom of Information Acts yielded nothing.



Tyranny doesn't need real science. Lies and police batons will always suffice.

But people are dying in large numbers! Really? If one examines the mortality rates for Ireland in 2020 we find they are **indistinguishable** from the rates in previous years. But the victims of Covid are unable to breathe! That may be true, but it should be noted that in every case of serious illness, where morbidity turns into mortality, an inability to breathe is invariably observed. The disease known as 'Covid' is so loosely defined that, in a great many instances, it is just another word for "death."

Loss of the power of speech

Numerous public statements by the government have shown that "dying with Covid" and "dying of Covid" are treated as semantic equivalents. One would have thought our highly qualified health professionals would have had difficulty with this outrageous conflation of medical terms, but no. None of them raised their voices. (Curiously, in all countries where Covid has been declared a pandemic, the most common symptom is loss of the power of speech among healthy people.)

Perhaps the most preposterous piece in this pantomime is the so-called Covid test, which replicates viral fragments over and over again until it "finds" one that supposedly matches the Covid virus – which, you may recall, has never been isolated. The "match", such as it is, does not even pretend to associate the patient's coronavirus with Covid-19 but merely locates a fragment in a genetic sequence commonly found in all coronaviruses. In short, the PCR test is a joke. It tests nothing and finds nothing, except perhaps a stray fragment from a previous coronavirus infection, such as the common cold.



We are not even taking into consideration here the harm caused by nasal swabs or the cunning way they can be used to insinuate nanoparticles and other hostile artefacts into our tissue, especially tissue in contact with our cerebrospinal fluid. Many experienced nurses have in the past been loath to perform a nasal swab on a patient because of the risks involved, such as accidentally perforating cartilaginous tissue near the sinus. But such concerns are cast aside as newly qualified paramedics perform the same procedure again and again, oblivious to the harm they may be doing.

Have none of these nurses ever bothered to ask why a virus that can be transmitted by oral droplets cannot be harvested from saliva alone? Why take these unnecessary risks using six-inch prods inserted deep into one's nasal cavity? The answer is simple: The big boys told them to do it, and so they do it. Responsible caregivers would ask questions and raise objections, but our well-paid nurses have chosen the path of zero resistance.

We know our politicians lie, and the bigger the pay-off the bigger the lie. We also know that the pharmaceutical industry is steeped in greed and deception and that its top people have been implicated many times in serious crimes. But until now we never really believed that the medical profession itself was controlled by sociopaths.

Doctors are being struck off for regaining the power of speech

One Irish doctor – Dr Gerald Waters of Celbridge – has been struck off, not because he opposes vaccines, but simply because he has concerns about the speed with which the Covid vaccines have been developed and tested. He does not have confidence in their safety and could not, with a clear conscience, inoculate his patients with them. This is a man doing his job as he ought to, checking the background to a product and making a responsible decision. He knows he is accountable before God for his actions and he doesn't want to do anything that might harm any of his patients. In short, he is an honest and fair minded man.

This is the headquarters of the organization that decided to revoke his license to practise:



HQ of Irish Medical Council

Who are these people? Well, the evidence shows that they have much in common with their political counterparts, and swill from the same trough. Members of the medical establishment advance their own and follow the agenda ordained by their wealthy international patrons.

They have no scruples whatever about abortion on demand, gender transition, the promotion of genetically modified flu vaccines for children, the employment in Irish hospitals of an exceptionally high proportion of foreign doctors and consultants from cultures hostile to Christianity, the vaccination of babies at 2 months with the Hepatitis B vaccine (which serves no conceivable clinical purpose), the extraordinary influence that the pharmaceutical industry exercises over national medical practise, or the illegal intrusion of the World Health Organization into numerous aspects of Irish public health policy.

We have also seen, in the past year, the mass shut-down of Irish hospital services and the imposition of extraordinary restrictions on normal social activity, all in the name of a public health ‘threat’ which HIQA was honest enough to admit, in a report published in July 2020, was no more than an *epidemic* (not a pandemic) and lasted only a few weeks. According to HIQA it hastened by just a few months the demise of a small number of elderly patients who had already reached the end of their natural lives.

Analysis of excess all-cause mortality in Ireland during the COVID-19 epidemic

3 July 2020

The HIQA report which correctly described Covid as an “epidemic.”

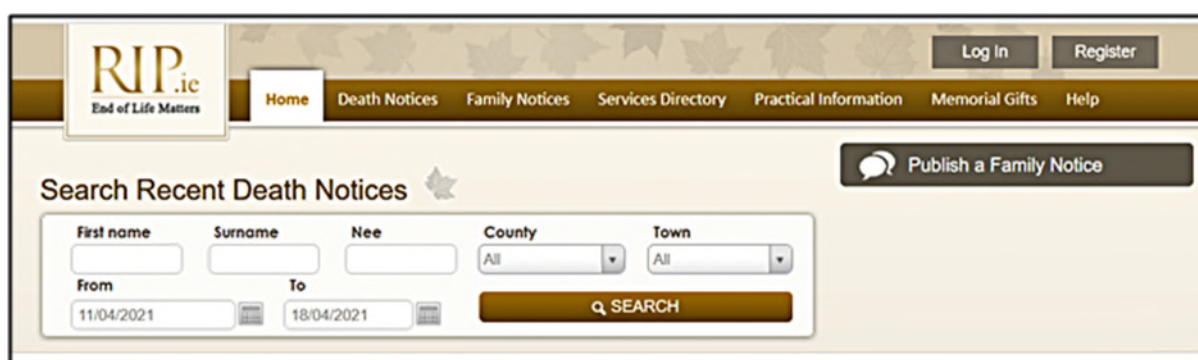
In short, the Irish medical establishment co-operated with the government in manufacturing a threat to public health which had ceased to exist after March-April 2020. It actively participated in the nasty fear mongering campaign conducted by the national media and at no stage adduced credible scientific reasons to justify the draconian measures which the government was imposing. This was all done in the name of medical science, and yet, apart from a scripted squeak or two from a maverick set of ‘advisors’ chosen by the government, the vast hoard of medical experts on this island had nothing to say. And we mean nothing.

The Irish were knifed in the back by the medical establishment

The people of Ireland were knifed in the back by the medical establishment. While the politicians who have betrayed us number in the hundreds, the medical professionals who did so number in the thousands. While we expect the former to lie, cheat and deceive, we had a reasonable expectation that a significant proportion of the medical fraternity would have spoken truthfully about the so-called threat and challenged the humbug and skulduggery in which the government indulged. But all we got was silent acquiescence in everything – everything! – that our sordid political elite demanded.

To show how some of their despicable lies were concocted, we'll turn to a fine piece of analysis by an engineer working for a large Dublin hospital.

This country may be unique in that it has an independent online archive of all deaths known as RIP.ie. The information is transmitted to the archive by the undertaker at the time of death with the approval of family members. It has been running for over a decade and is surprisingly accurate. By law all deaths must also be registered with the state – via the General Register Office (GRO). This is normally done by the medical doctor who signed the death certificate. Thus, were it ever necessary to do so, the public in Ireland can check the accuracy of the mortality statistics released by the GRO by reference to data available on the RIP.ie archive.

The image is a screenshot of the RIP.ie website. At the top, there is a navigation bar with the RIP.ie logo and the tagline "End of Life Matters". To the right of the logo are links for "Home", "Death Notices", "Family Notices", "Services Directory", "Practical Information", "Memorial Gifts", and "Help". Further right are "Log In" and "Register" buttons. Below the navigation bar, there is a section titled "Search Recent Death Notices" with a magnifying glass icon. To the right of this section is a button that says "Publish a Family Notice". The search form includes fields for "First name", "Surname", "Nee", "County", and "Town". Below these are "From" and "To" date fields with calendar icons. The "From" field is set to "11/04/2021" and the "To" field is set to "18/04/2021". A "SEARCH" button with a magnifying glass icon is at the bottom right of the form.

The engineer, Kieran Morrissey, had serious doubts about the accuracy of the weekly Covid-19 mortality statistics published by the government. He contacted the academics who seemingly had a role in compiling these statistics and asked about some apparent anomalies. They were using RIP.ie as their main source of information on current rates of mortality, but claimed to have access to a superior version of the archive which the public could not access. Mr Morrissey doubted whether this was the case and made his own copy of the archive, cleaning out duplicate entries and deaths which occurred outside of Ireland. He then checked the multi-year mortality statistics on his system against those produced by the Central Statistics Office (CSO). The match was extremely close – For a more detailed account of his findings see **Appendix A**.

His analysis shows that the government lied

He was then in a position to use his database to check whether or not the government's Covid-19 mortality statistics were accurate. His findings point to a high degree of data manipulation and deception by the government. Not only did they lie about the number of excess deaths and the number of deaths that could be attributed to 'Covid-19', but they have also been concealing the number of deaths caused by adverse reactions to the Covid vaccine. In short the government has been working hand in hand with the Irish medical establishment to deceive, intimidate and coerce the people of Ireland, to destroy our economy, and to inflict irreparable damage on our society.

Hospital consultants have been bought off. Their basic pay is \$300,000 a year, in addition to income earned through private practice. Someone who succeeds in joining this elite group of 3,500 will not want to jeopardise his or her standing and future prospects by questioning government policy. There are a further 6,400 non-consultant hospital doctors who are waiting to be promoted into their ranks. Ireland also has in excess of 4,000 general practitioners, with an average basic salary of \$120,000 a year, and 78,000 registered nurses with a basic salary of \$58,000 – which is among the highest in the world.

Search Recent Death Notices

First name

Surname

Nee

County

Town

From

To

01/01/2021

31/03/2021

SEARCH

[Home](#) > [Death Notice](#) > [Dublin](#)

Death Notices for Dublin

 @RIP.ie Dublin

Name	Town	County	Published
Sheridan (née Hughes), Margaret (Roisin)	Bayside	Dublin	24/03/21
Doyle (née Keane), Jennie (Jane)	Bayside	Dublin	23/03/21
Dennehy (née Carroll), Carmel	Bayside	Dublin	22/03/21
Feeney, Michael	Bayside	Dublin	01/03/21
Lawlor, David (Davy)	Bayside	Dublin	08/02/21
Babel Thomson, Dieter	Bayside	Dublin	02/02/21
Ahearne, Jean	Bayside	Dublin	31/01/21
O'CONNELL (née Corrigan), Clare	Bayside	Dublin	28/01/21
Crowley, Noel	Bayside	Dublin	20/01/21
Strong (née Carroll), Nora	Bayside	Dublin	04/01/21

[Previous](#)
[Next](#)

Deaths published on RIP.ie in respect of 'Dublin [county] Bayside [town]' in the first quarter of 2021.

Most of these medical personnel would possess sufficient knowledge of epidemiology to know that the restrictions imposed by the government were excessive and out of all proportion to the 'threat' posed by a coronavirus. They would also know that many medical decisions, especially those affecting the general population, require a careful evaluation of the evidence and a willingness to hear diverging points of view. Of course, this did not happen. These well-paid professionals meekly accepted without question or demur the draconian program imposed by the government and failed totally in their duty of care to the Irish people. Medical ethics were now guided by a new lodestar – *First and foremost, take the money and say nothing.*

**Excerpts from interview with Mike Yeadon,
retired chief scientist with Pfizer, April 7th, 2021**

“The eugenicists have got hold of the levers of power, and this is a really artful way of getting you to line-up and receive some unspecified thing that will damage you. I have no idea what it will actually be, but it won’t be a vaccine because you don’t need one. And it won’t kill you on the end of the needle because you would spot that.

“It could be something that will produce normal pathology, it will be at various times between vaccination and the event, it will be plausibly deniable because there will be something else going on in the world at that time, in the context of which your demise, or that of your children, will look normal.

“That’s what I would do if I wanted to get rid of 90% or 95% of the world’s population. And I think that’s what they’re doing...

“It’s become absolutely clear to me, even when I talk to intelligent people, friends, acquaintances ...and they can tell I’m telling them something important, but they get to the point [where I say] ‘your government is lying to you in a way that could lead to your death and that of your children,’ and they can’t begin to engage with it. And I think maybe 10% of them understand what I said, and 90% of those blank their understanding of it because it is too difficult. And my concern is, we are going to lose this, because people will not deal with the possibility that anyone is so evil...

“But I remind you of what happened in Russia in the 20th Century, what happened in 1933 to 1945, what happened in, you know, Southeast Asia in some of the most awful times in the post-war era. And, what happened in China with Mao and so on.

“We’ve only got to look back two or three generations. All around us there are people who are as bad as the people doing this. They’re all around us. So, I say to folks, the only thing that really marks this one out, is its *scale*.”

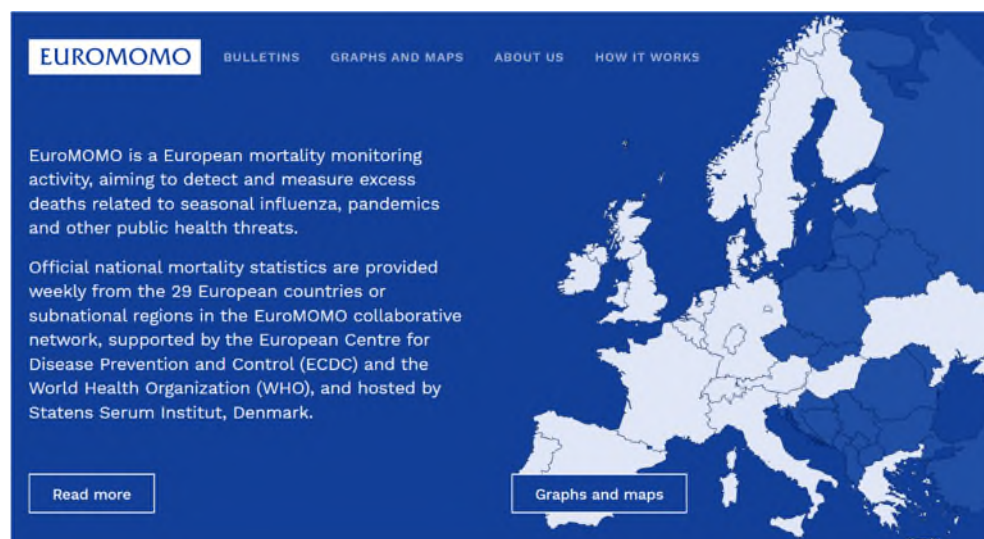
What the medical community is refusing to do

If they truly wanted to unearth solid evidence that the government was lying, they could have undertaken an exercise similar to the one conducted by Mr Morrissey, who (to our knowledge) has no medical training. He was able to show that:

- 1 the government fraudulently manipulated the national mortality statistics in 2020;
- 2 the government greatly exaggerated the number of deaths due to 'Covid' in 2020;
- 3 the government continued to use the PCR test knowing it was not fit for purpose and by this means generated thousands of false positives, all with a view to frightening the public;
- 4 the government used the annual 'flu season' spike in deaths in 2020 to trick the public into believing that something entirely new and dangerous was happening;
- 5 the government is now manipulating the mortality statistics to disguise the number of deaths arising from adverse reactions to the Covid vaccines and to artificially inflate the number of deaths due to 'Covid'.

A careful study of Mr Morrissey's paper should convince any open-minded person that the government has been deceiving the Irish people, that it has been doing so in a systematic way with the complicity of the Irish medical establishment, and that most, if not all, of the restrictions imposed by the government constitute a serious criminal offense against the Irish people.

Mr Morrissey's paper confirms that there was NO pandemic in Ireland in 2020 and that the excess death rate for 2020 was at its lowest in 8 years! (We referred to this in a previous paper (#264), using the weekly mortality figures for Ireland which are available on the ***EuroMomo*** website. See [Appendix D](#) of that paper in which we stated: "The statistics show that for the year as a whole that the number of excess deaths was close to zero. There was no pandemic, while the 'epidemic', such as it was, lasted only 6 weeks or so.")



CONCLUSION

The killing has started. Mr Morrissey's analysis indicates that the Covid vaccinations, which commenced in early January, are accelerating the deaths of elderly people across Ireland. His figures suggest that 500 elderly people were killed by the Covid vaccine in January-February 2021.

Incredibly there is no central database in Ireland with a record of serious adverse reactions to Covid vaccines. On behalf of Anti-Corruption Ireland, we submitted access requests under the Freedom of Information Act on 11 March to the four 'public health' organizations in Ireland – the HSE, the Department of Health, HIQA, and the HPRA. Here is the text of our request:

"Please supply me with a breakdown of reported adverse events experienced by persons who received a Covid vaccine in Ireland. This request relates both to records collected and maintained by [your organization] and to records or copies thereof received by [your organization] from another organisation. The breakdown should supply the date and location of each case and the manufacturer of the vaccine administered. It should distinguish between deaths and injuries, with a description of the nature of the injury in each instance."

The deadline for reply has long passed, but only one of the four organizations issued a reply (even though all four were required to do so in law). Here it is, dated 9 April:

"The HPRA has assessed your request and we have now made a final decision to refuse your request subject to section 15(1)(d) of the Freedom of Information Act 2014.... A head to whom an FOI request is made may refuse to grant the request where – (d) the information is in the public domain... As previously highlighted in response to your FOI request received in January 2021, reports of suspected adverse reactions submitted to the HPRA are entered on the European Medicines Agency's (EMA) database of adverse reactions and are publicly accessible from www.adrreports.eu."

The HPRA has no records on its files regarding adverse reactions to the Covid vaccines. None! If it had, it was required by law to provide copies under FOI. Instead it claimed the information is in the public domain and provided a link to a website which is meant to contain data on adverse reactions in Ireland. The database in question is the one maintained by the European Medical Agency (EMA).

It also provided the following guidance note to show how to access the data:

- Click 'en'
- Follow link for COVID-19 vaccines
- Click 'C' and scroll down to whichever COVID-19 vaccine is of interest to you. Click on that and different information is available under different tabs such as 'Number of individual cases received over time' and 'Number of individual cases by EEA countries'

These instructions take the enquirer to the following page:



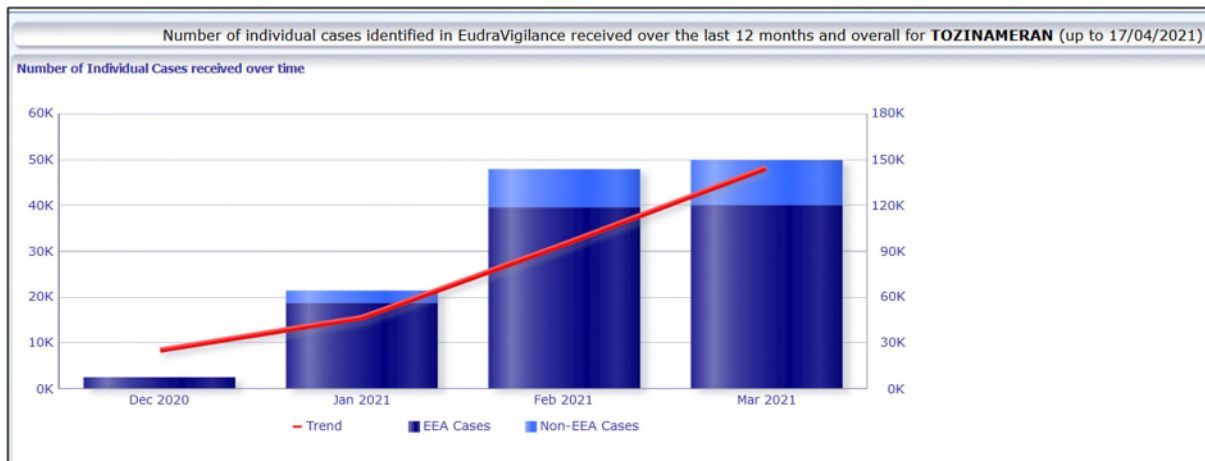
EudraVigilance - European database of suspected adverse drug reaction reports

Home About Understanding reports Search Medicine safety Switch to Veterinary

[COLISTIMETHATE](#)
[COLISTIN*](#)
[COLLAGEN*](#)
[COLLAGENASE CLOSTRIDIUM HISTOLYTICUM](#)
[COLLAGENASE CLOSTRIDIUM HISTOLYTICUM, PROTEASE*](#)
[COLLOIDAL BISMUTH PECTIN*](#)
[COMPLEMENT C1 ESTERASE INHIBITOR](#)
[CONCENTRATE OF PROTEOLYTIC ENZYMES ENRICHED IN BROMELAIN](#)
[CONCENTRATED SOLUTION OF SODIUM HYPOCHLORITE*](#)
[COPPER*](#)
[COPPER GLUCONATE, MANGANESE GLUCONATE*](#)
[CORIFOLLITROPIN ALFA](#)
[CORTICORELIN*](#)
[CORTICOTROPIN*](#)
[CORTISONE*](#)
[CORTIVAZOL*](#)
[COVID-19 MRNA VACCINE MODERNA \(CX-024414\)](#)
[COVID-19 MRNA VACCINE PFIZER-BIONTECH \(TOZINAMERAN\)](#)
[COVID-19 VACCINE ASTRAZENECA \(CHADOX1 NCOV-19\)](#)
[COVID-19 VACCINE JANSSEN \(AD26.COV2.S\)](#)
[CRISABOROLE](#)
[CRIZANLIZUMAB](#)
[CRIZOTINIB](#)

We have highlighted the data group we are interested in. However, when we access each of these four options, we find that data in respect of individual countries is NOT provided!

The only disaggregation is in respect of EEA versus non-EEA countries, such as the following in respect of the Pfizer vaccine:



The most we can tell from the EMA database is that, by 17 April 2021, Ireland had 1,611 cases of an adverse reaction to a Covid vaccine (comprising 1537 for Pfizer and 74 for Moderna). We are told nothing about the severity of these reactions, the nature and extent of the injuries caused, or how many resulted in death.

The vested interests that are controlling the entire Covid program are making sure that the true impact of the vaccines cannot be established. The public is being deliberately kept in the dark.

This can only mean that the pharmaceutical industry, the medical profession and the government, as well as certain senior managers in the public service, are fully aware that, in a great many cases, the vaccines are causing real harm as soon as they are administered. If the authorities are going to these lengths to conceal what is happening, it is reasonable to assume that the number and severity of the adverse reactions on a national scale greatly exceed what the public would regard as 'acceptable' (assuming any vaccine-related injuries can be considered acceptable).



Many scientists and experts in the field of epidemiology are warning that the Covid vaccine program is being used to manipulate the general population and, over time, to reduce it. In short, it is a tool of eugenics and social control. In an interview with Patrick Delaney of *Lifesite News* on 7 April, Mike Yeadon, a retired chief scientist with Pfizer, made a number of truly startling statements about the program.

Having seen the way the industry is pushing these vaccines and crushing all attempts to question their safety, not to mention the huge number of reported cases of severe adverse reactions, he has reluctantly come to the conclusion that the program is designed to do harm to western society. We have already quoted extensively from his interview. Here is another chilling excerpt:

“Biotechnology provides you with limitless ways, frankly, to injure or kill billions of people. And since I can’t think of a benign explanation for any of the steps: variants, top-up vaccines, no regulatory [i.e. safety] studies... it’s not only that I cannot think of a benign explanation, the steps described, and the scenario described, and the necessary sort of resolution to this false [health] problem is going to allow what I just described: unknown, and unnecessary gene sequences injected into the arms of potentially billions of people for no reason. I’m very worried ...that pathway will be used for mass depopulation, because I can’t think of any benign explanation.”

We urge those who still doubt the gravity of what is happening to read the complete interview:

<https://www.lifesitenews.com/news/exclusive-former-pfizer-vp-your-government-is-lying-to-you-in-a-way-that-could-lead-to-your-death>

The main purpose of this paper was to highlight the sociopathy prevalent among the Irish medical elite. The same sociopathy is also endemic in other countries. We also found, along the way, a dark moral vacuum at the heart of the Irish public health system, where tens of thousands of qualified medical personnel failed to challenge any aspect of the reckless, irrational and unscientific policies imposed by the government. Many privileged, well-paid, and highly intelligent people must have known that the government’s figures were a mass of lies, but they said nothing.

Do they not know that they will stand one day before the God who made them? Are they entirely without understanding? Many of these people profess to be Christian, but their actions show they are far from Christ. Rather, they seem content to serve the archons of the coming New World Order.

We condemn, as we should, a nurse like Beverley Allitt in the UK who, in 1991, murdered 4 children in her care and did serious harm to 9 others. And yet thousands of nurses and medical professionals in Ireland are doing whatever the pharmaceutical industry tells them to do, with no thought whatever to the risks involved, the bogus science behind it, or the grievously immoral nature of their conduct. A great many of them will end up harming or killing far more innocent people than Ms Allitt (who received 13 life sentences and is unlikely ever to be released.)

We are dealing with a nest of vipers. It would seem that, no matter how hard one tries to convince one of these people that his conduct is sinful, he will find a way to absolve himself of all responsibility. How well the Preacher put it in Ecclesiastes:

**“The beginning of the words of his mouth is foolishness:
and the end of his talk is mischievous madness.”
- Ecclesiastes 10:13**

**Jeremy James
Ireland
April 20, 2021**

- SPECIAL REQUEST -

Regular readers are encouraged to download the papers on this website for safekeeping and future reference. They may not always be available. Papers for each year from 2009 to 2020 may also be downloaded in one or more files from www.archive.org (Use search term ‘Jeremy James’).

We are rapidly moving into an era where material of this kind may be obtained only via email. Readers who wish to be included on a future mailing list are welcome to contact me at the following email address:- **jeremypauljames@gmail.com**.

For further information visit www.zephaniah.eu

Copyright Jeremy James 2021

Study of COVID-19 Deaths

By Kieran Morrissey

April 16, 2021

Objectives

The goal of this study is not to impress academics with complex statistics or seek favourable peer reviews, but to demonstrate to the ordinary decent citizen of Ireland, in the simplest possible terms, how the 2020 COVID-19 deaths claimed by NPHET every night on RTE1 and published on the data.gov.ie website **cannot possibly be true**. To that end I will present basic arithmetic and graphs as it is my belief that every Irish citizen should be fully informed of **the fraud which has been carried out by the Irish Government, its agents and the media** for the benefit of vested interests **to terrorise** the population into submitting to their draconian COVID measures by grossly overstating the deaths due to COVID-19 in 2020.

This study will conclude that **Ireland had its lowest death rate in 2020 since 2012**.

Introduction

It is a legal requirement in Ireland that every death that takes place in the State must be recorded and registered. Records of deaths in Ireland are held in the General Register Office (GRO), which is the central civil repository for records relating to Births, Marriages and Deaths in Ireland. Deaths must be registered as soon as possible after the death and no later than 3 months. The GRO estimate that approximately 80% of deaths are registered in this timeframe; however many death registrations take longer than 3 months, especially if a death is referred to the Coroner's Service. Such deaths include suicides, violent deaths and, more recently, all COVID-19 deaths. These deaths may not be registered for months or years after the occurrence. The GRO provide regular updates on the total deaths registered by the month they occurred in but, because of the lag in registrations, they do not come close to being accurate until approximately six months after the month of occurrence. Generally, this lag would not cause a major problem as the death data is mainly used for medical research. However in natural disasters and health emergency situations, such as the ongoing alleged COVID-19 pandemic, accurate and up-to-date death data is critical for planning and implementing measured responses to emerging situations. **Without this current data on deaths, vested interests can use misinformation to understate or exaggerate deaths to pacify or terrorise the general population** into certain actions or inactions, i.e., mass manipulation or hysteria.

Methodology

During the early stages of the alleged COVID-19 pandemic in 2020 a number of publicly funded Irish academics began **fearmongering** through the media, including state sponsored media. They estimated thousands of additional deaths would occur due to COVID-19. These deaths are called “excess” as they are above the normally expected [number of] deaths based on the previous 5-year average. These academics were estimating deaths compared to deaths notices published on the [RIP.ie website](#). Anecdotally the evidence I was receiving from family, friends, work colleagues and my own observations in the major Dublin hospital where I work made me sceptical that the large numbers of COVID-19 deaths being reported were actually excess deaths and were not above normal for previous flu seasons. In fact, January 2020 had a very low occurrence of flu cases. I began to look at the RIP.ie death notices and could not see how the academics could predict such high numbers of deaths. I contacted the academics and debated with them by email but they claimed the RIP.ie database they were using was privileged and would not share it with me. I was led to believe that they had obtained a proprietary database of the death notices from RIP.ie.

Later in November 2020 I became aware of an experiment being carried out by John Flanagan of the Central Statistics Office (CSO). He too was using RIP.ie death notices to estimate the total number of deaths occurring in recent months. The last CSO press statement on 2nd November 2020 regarding John’s experiment which ended in the September encouraged me to look closer at the possibility of obtaining more up-to-date figures on deaths using the RIP.ie death notices. I developed an automated system to obtain the data required from the death notices published on the RIP.ie website, plus a method to remove or “clean” notices for deaths which occurred outside of Ireland and duplicate notices. I benchmarked my estimates against previous monthly GRO/CSO death data back to 2014 and found that it was as accurate as John Flanagan found during his experiment.

Results

The comparison in tabular format between the death notes that I obtained from the RIP.ie website (cleaned to remove deaths which had occurred outside Ireland and duplicate notices) and the published GRO/CSO data from 2014 to 2021 is shown in Table 1 & 2 below.

Table 1

	Deaths estimated on RIP.ie death notices							
	2021	2020	2019	2018	2017	2016	2015	2014
JAN	3,722	2,885	3,093	3,619	3,494	3,083	2,833	2,748
FEB	2,968	2,549	2,674	2,802	2,586	2,724	2,722	2,612
MAR	2,277	2,754	2,699	3,058	2,647	2,869	2,857	2,614
APR	0	3,469	2,645	2,677	2,441	2,564	2,401	2,375
MAY	0	2,618	2,745	2,497	2,495	2,517	2,452	2,273
JUN	0	2,192	2,466	2,374	2,310	2,310	2,217	2,147
JUL	0	2,230	2,493	2,477	2,283	2,356	2,184	2,285
AUG	0	2,328	2,381	2,377	2,375	2,320	2,264	2,238
SEP	0	2,369	2,467	2,343	2,380	2,358	2,317	2,167
OCT	0	2,694	2,797	2,619	2,681	2,463	2,527	2,410
NOV	0	2,493	2,792	2,711	2,567	2,618	2,322	2,336
DEC	0	2,695	3,145	2,714	2,933	3,084	2,677	2,640
Yr. Total	8,967	31,276	32,397	32,268	31,192	31,266	29,773	28,845
RIP.ie 2014-2019 =								185,741

Table 2

	GRO death registrations from 13th April 2021 email update							CSO
	2021	2020	2019	2018	2017	2016	2015	2014
JAN	3,228	2,957	3,049	3,503	3,442	3,131	2,989	2,828
FEB	2,070	2,691	2,607	2,870	2,537	2,710	2,778	2,696
MAR	604	2,891	2,675	3,015	2,642	2,886	2,914	2,656
APR	0	3,552	2,507	2,617	2,452	2,566	2,510	2,446
MAY	0	2,598	2,655	2,424	2,423	2,520	2,566	2,310
JUN	0	2,133	2,389	2,328	2,297	2,307	2,290	2,206
JUL	0	2,121	2,325	2,396	2,295	2,369	2,225	2,323
AUG	0	2,233	2,319	2,299	2,380	2,269	2,355	2,280
SEP	0	2,281	2,414	2,362	2,395	2,412	2,413	2,147
OCT	0	2,534	2,588	2,543	2,635	2,476	2,616	2,385
NOV	0	2,300	2,687	2,607	2,554	2,595	2,401	2,376
DEC	0	2,373	3,067	2,731	3,063	3,110	2,748	2,599
Yr. Total	5,902	30,664	31,282	31,695	31,115	31,351	30,805	29,252
GRO/CSO 2014-2019 =								185,500

While it can be seen that there are variations between the monthly and yearly data, the totals for the years 2014 to 2019 is 185,741 for RIP.ie and 185,500 for GRO/CSO, a difference of only 0.13%.

I then calculated the previous 5-year average for each month 2018-2021 from the data in Table 1 & Table 2. The excess deaths were calculated as the difference between the previous 5-year average for each month and the total for that month as shown in Table 3 below. The COVID-19 deaths claimed by NPHET and sourced from data.gov.ie is also included in Table 2 for each month from March 2020 to March 2021 (No COVID-19 deaths are provided for January and February 2020 and are assumed to be zero).

Table 3

	CSO/ GRO			RIP.ie			data.gov.ie
	GRO/CSO Tot. deaths	GRO/CSO Prev. 5yr AVE	GRO/CSO EXCESS deaths	Rip.ie Tot. deaths	RIP.ie Prev. 5yr AVE	RIP.ie EXCESS deaths	NPHET claimed COVID-19
Jan-19	3,049	3,179	-130	3,093	3,155	-62	
Feb-19	2,607	2,747	-140	2,674	2,689	-15	
Mar-19	2,675	2,823	-148	2,699	2,809	-110	
Apr-19	2,507	2,480	27	2,645	2,492	153	
May-19	2,655	2,449	206	2,745	2,447	298	
Jun-19	2,389	2,299	90	2,466	2,272	194	
Jul-19	2,325	2,322	3	2,493	2,317	176	
Aug-19	2,319	2,329	-10	2,381	2,315	66	
Sep-19	2,414	2,346	68	2,467	2,313	154	
Oct-19	2,588	2,544	44	2,797	2,540	257	
Nov-19	2,687	2,507	180	2,792	2,511	281	
Dec-19	3,067	2,914	153	3,145	2,810	335	
Jan-20	2,957	3,223	-266	2,885	3,224	-339	
Feb-20	2,691	2,714	-23	2,549	2,702	-153	
Mar-20	2,891	2,826	65	2,754	2,826	-72	71
Apr-20	3,552	2,560	992	3,469	2,546	923	981
May-20	2,598	2,518	80	2,618	2,541	77	463
Jun-20	2,133	2,309	-176	2,192	2,335	-143	106
Jul-20	2,121	2,322	-201	2,230	2,359	-129	41
Aug-20	2,233	2,343	-110	2,328	2,343	-15	18
Sep-20	2,281	2,399	-118	2,369	2,373	-4	31
Oct-20	2,534	2,591	-57	2,694	2,617	77	119
Nov-20	2,300	2,569	-269	2,493	2,602	-109	146
Dec-20	2,373	2,922	-549	2,695	2,911	-216	191
Jan-21	3,228	3,216	12	3,722	3,235	487	1,082
Feb-21	2,070	2,723	-653	2,968	2,667	301	1,045
Mar-21	604	2,822	-2,218	2,277	2,805	-528	376
Total Excess						-103	2,167

Discussion

As can be seen from **Table 3**, the excess deaths based on RIP.ie data for a full year from January to December 2020 (**in red**) total up to -103 whereas the total deaths claimed by NPHET/data.gov.ie from March to December 2020 (**in blue**) total up to 2,167, **an alarming difference of 2,270 deaths.**

It must be noted that NPHET/data.gov.ie do not provide data on COVID-19 deaths in January and February 2020 and [are] therefore assumed to be zero. If COVID-19 deaths claimed by NPHET/data.gov.ie were caused by a novel virus, and there were no other factors causing excess deaths (such as another novel disease, war, famine, natural disaster, etc.), then the NPHET/data.gov.ie claimed COVID-19 deaths (**solid red line**) should closely match the RIP.ie excess deaths (**dashed green line**) in **Graph 1 below**.

In order to analyse the results further I prepared **Graph 1** from the 5-year average and excess deaths calculated in Table 3. The expected influenza season can be easily identified from the 5-year average shown in the data in Table 3 and the peak in Graph 1 in January 2020 –

3,223 deaths GRO/CSO (solid blue line)

3,224 deaths RIP.ie (dashed purple line).

The drop in excess deaths in the data in Table 3 and the dip in Graph 1 for January 2020, namely:

– 266 deaths GRO/CSO (solid black line) and

– 339 deaths RIP.ie (dashed green line)

indicate that the deaths which would *historically* occur in January, often referred to as the “flu season,” will occur later in the year, as they have occurred occasionally in previous years. These deaths, which always occur at some time during the year, were delayed due to some undetermined factor(s) in 2020.

[Mr Morrissey then shows, by reference to the 5-year moving averages in Graph 1 (solid blue line for GRO/CSO and dotted purple line for RIP.ie), that the annual flu season, which normally falls in January (as per the 5-year moving average), actually fell in April in 2020. As he says, “the “flu season” moved from January to April in 2020.” This is shown by the “spike” in April in Graph 1.]

The number of excess deaths in April 2020 is highlighted in yellow in the data in **Table 3** above and, as shown as the spike in **Graph 1** below, indicates where the influenza or COVID-19 season moved –

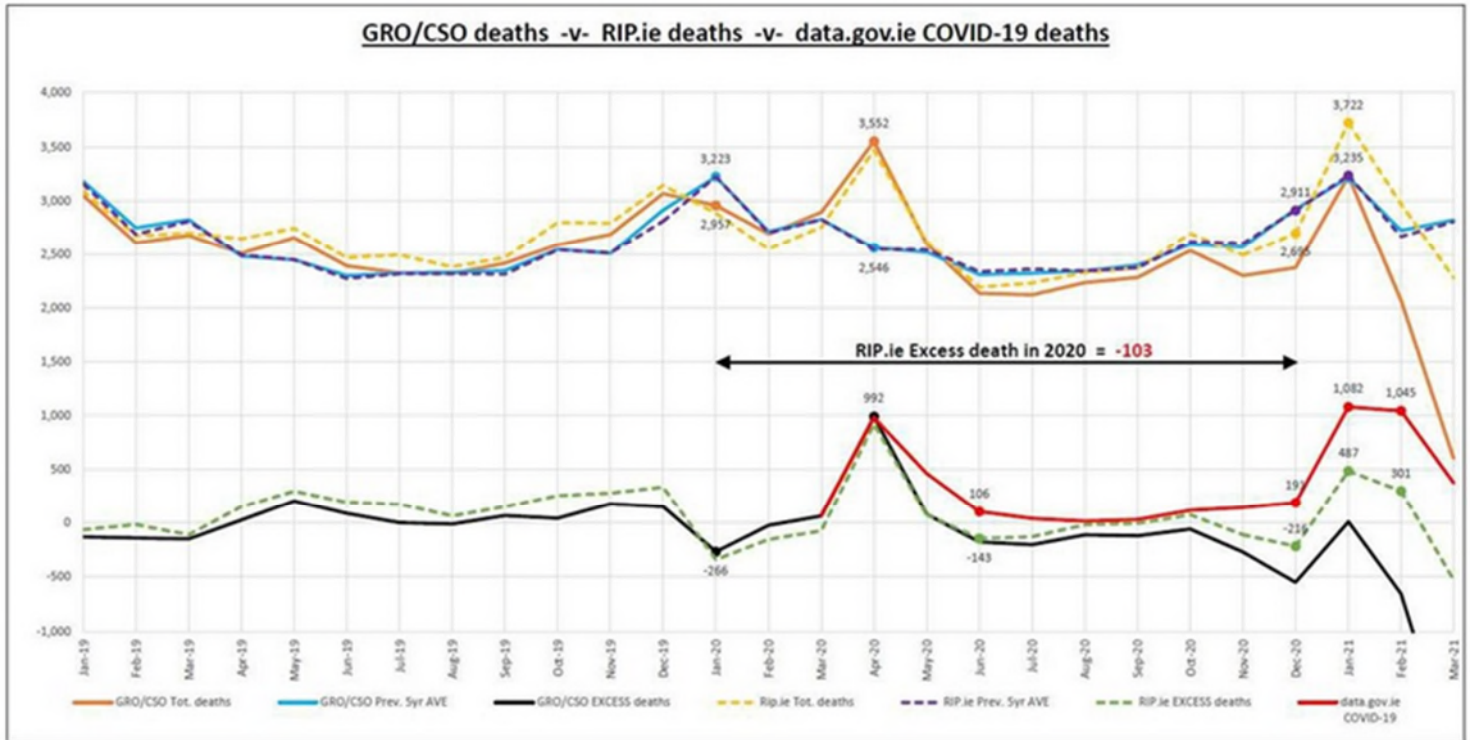
992 deaths GRO/CSO (solid black line)

923 deaths RIP.ie (dashed green line)

981 deaths NPHET/data.gov.ie [claimed COVID-19 deaths] (solid red line).

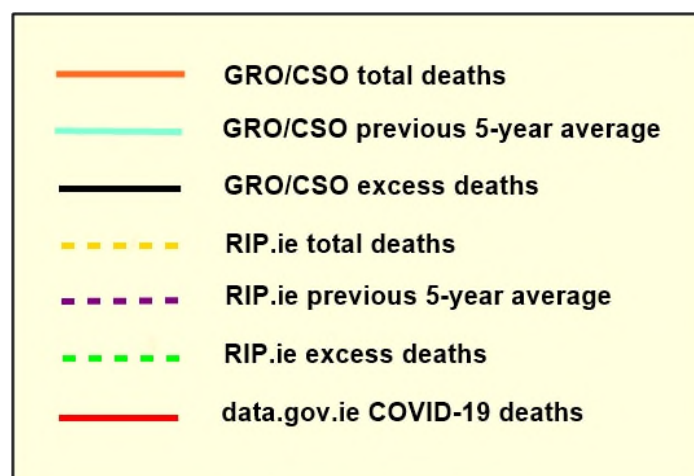
Oddly, this is the only point at which the claimed COVID-19 deaths match the GRO/CSO and RIP.ie excess deaths.

Graph 1

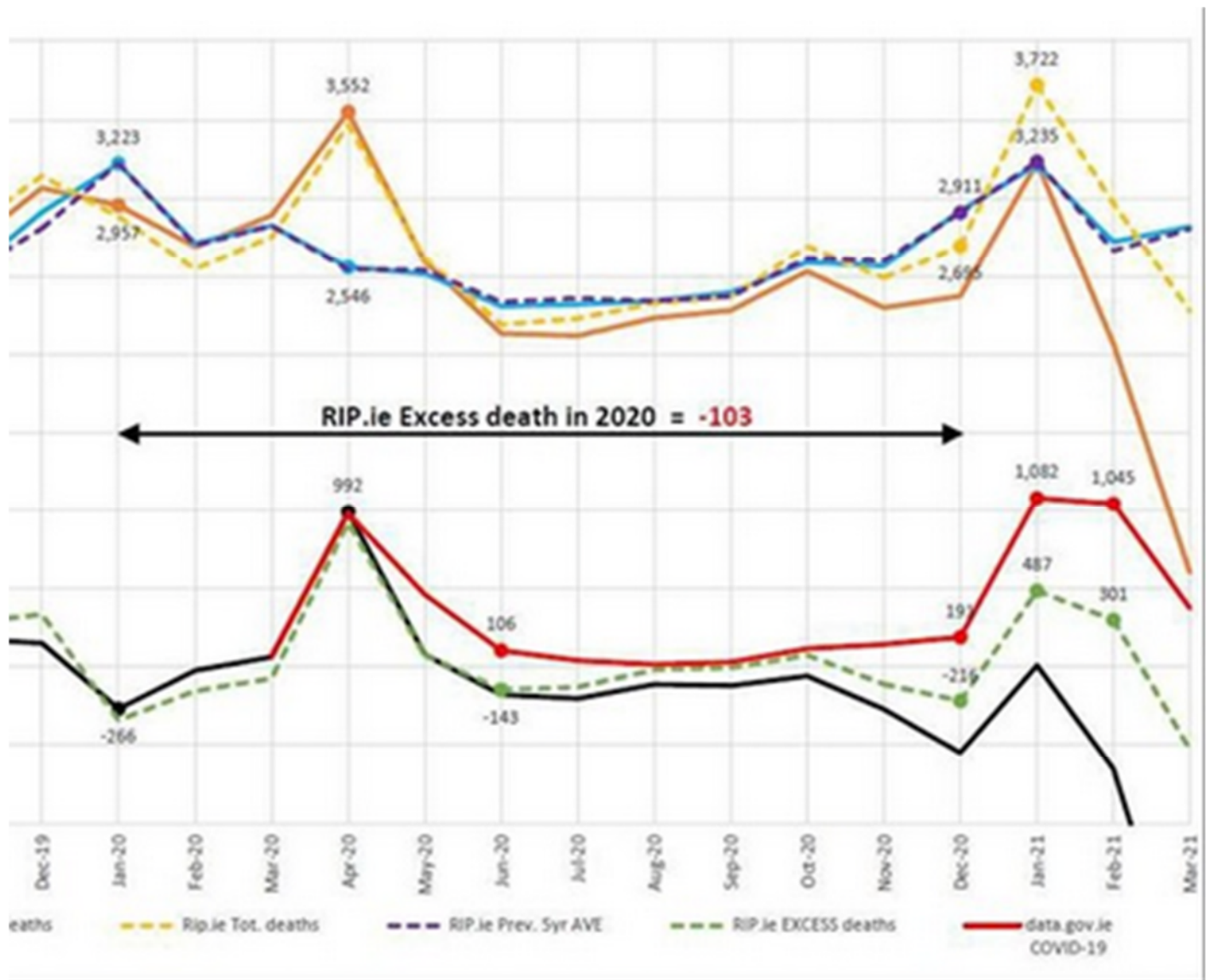


Editor's Note: Since this Graph is difficult to read, we provide overleaf an enlargement of the righthand section.

Color code:



Graph 1 – enlarged righthand section



Color code:

—	GRO/CSO total deaths
—	GRO/CSO previous 5-year average
—	GRO/CSO excess deaths
- - -	RIP.ie total deaths
- - -	RIP.ie previous 5-year average
- - -	RIP.ie excess deaths
—	data.gov.ie COVID-19 deaths

The next expected influenza season is again indicated in the 5-year average data in **Table 3** and the peak in **Graph 1** at January 2021, namely –

3,216 deaths GRO/CSO (solid blue line)

3,235 deaths RIP.ie (dashed purple line)

However, the total deaths in the data in Table 3 and the spike in Graph 1 in January 2021 is –

3,722 deaths RIP.ie (dashed yellow line), [which is] also higher than the April 2020 spike indicating that **a serious unexplained event took place** and increased the excess deaths by –

487 deaths RIP.ie (dashed green line) in January 2021, which is the same month that the COVID-19 vaccination was rolled out in the Irish nursing homes. Death data from RIP.ie also indicates the deaths which occurred in nursing homes directly after the rollout of vaccinations are approximately 500 higher than normal for this time.

The number of claimed COVID-19 deaths shown (a) in the data in **Table 3** and (b) as the two high points in January and February 2021 in **Graph 1**, **indicate a very large exaggeration of COVID deaths –**

1,082 [January] and 1,045 [February] deaths per NPHET/data.gov.ie (solid red line)

in comparison with –

487 [January] and 301 [February] RIP.ie excess deaths (dashed green line).

I obtained 50 records for deaths which occurred in the nursing homes after the scheduled date of COVID-19 vaccinations and, when I examined them, I found that the majority of the deaths were recorded as COVID-19 even though they occurred very shortly after the scheduled vaccination dates. **If those patients who died were ill with COVID-19 then they should not have been vaccinated.** On the other hand if they did not have a positive COVID-19 PCR test **then very likely they died from an adverse reaction to the experimental COVID-19 vaccination and not COVID-19 disease.**

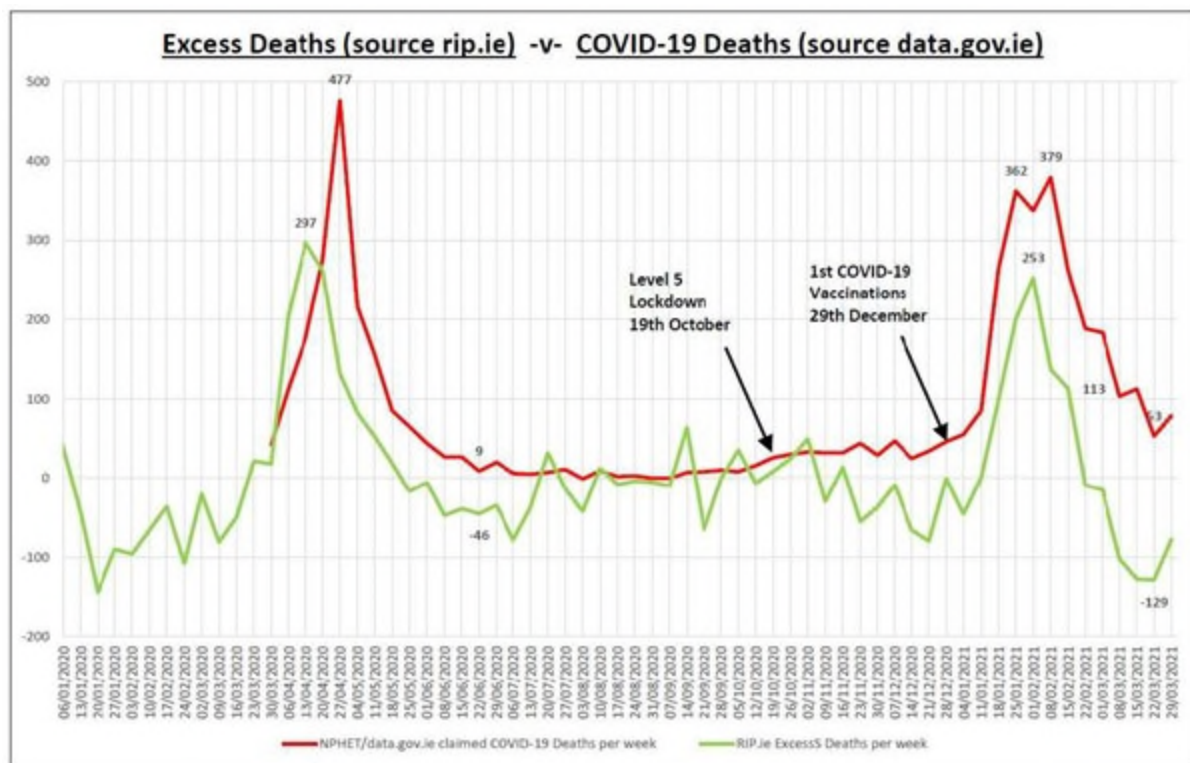
[Paragraph omitted]

The claimed number of COVID-19 deaths per NPHET/data.gov.ie (solid red line) also looks suspiciously higher compared to the excess deaths indicated in Graph 1 by RIP.ie (dashed green line) and GRO/CSO (solid black line) between June and December 2020. For this reason, I produced a more detailed **Graph 2** for December 2020 to Mar 2021 using the same RIP.ie data (but plotted weekly for closer analysis).

If the large number of COVID-19 deaths claimed by NPHET/data.gov.ie were caused by a novel virus, and no other factors were causing excess deaths (such as another novel disease, war, famine, natural disaster, etc.), then the COVID-19 deaths claimed by NPHET/data.gov.ie (solid red line) should closely match the RIP.ie excess deaths (solid green line) in **Graph 2**. However, as can be seen, the COVID-19 deaths are consistently higher than the RIP.ie excess deaths. It can also be seen at this level of detail that the peak of the claimed COVID-19 deaths in mid-April 2020 was approximately 200 deaths higher and 2 weeks later than the actual peak in excess deaths indicated by the RIP.ie death notices.

The NPHET/data.gov.ie claimed COVID-19 deaths (solid red line) in **Graph 2** is also a very smooth line compared to the fluctuating RIP.ie excess deaths (dashed green line), which would be expected for weekly data. This makes the red line appear to be unnatural and false or fabricated.

Graph 2



An argument which has been raised by various vested interests is the possibility that healthcare deprivation during the alleged pandemic may have increased other causes of deaths in 2020. While there is a possibility of this occurring later in 2020, I feel that it would be very doubtful that it had any effect in the early part of 2020...

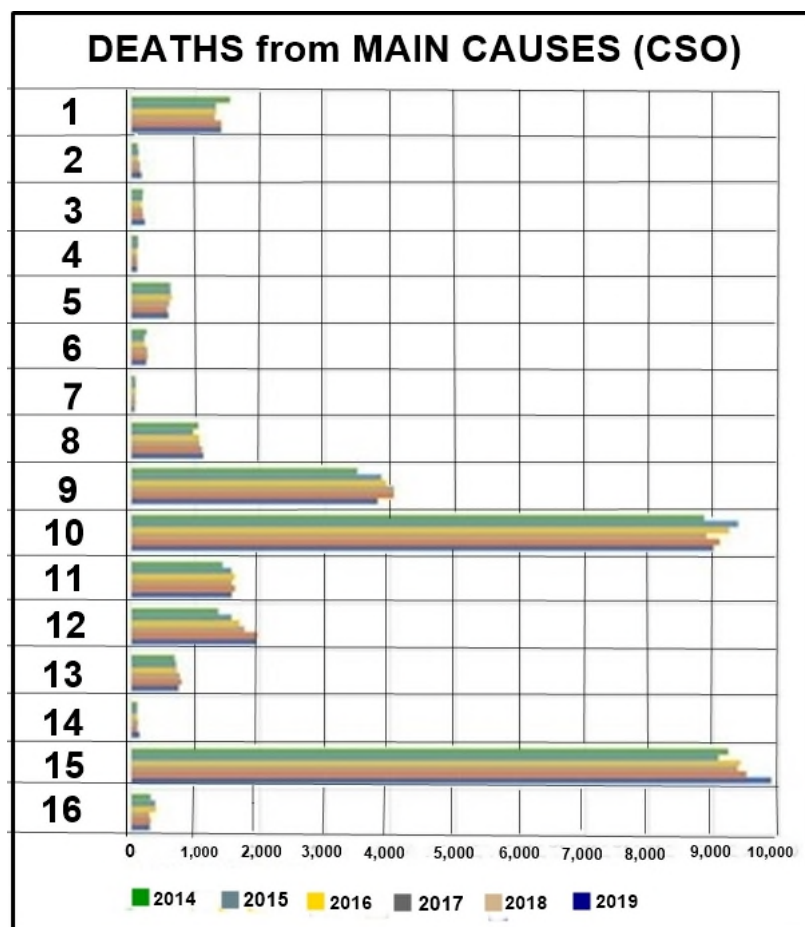
Other vested interests claim that the lockdowns have reduced influenza deaths and accidental deaths, thereby compensating for the extra COVID-19 deaths. This, it is claimed, would explain why the total or excess deaths are not higher in 2020. I find this a difficult proposition to accept as the *CSO 2019 Vital Statistics Yearly Summary* states that accidents accounted for only 909 deaths and, even if there were no accidental deaths in 2020, it would not make up the 2,270 difference between claimed COVID-19 deaths and excess deaths.

Influenza deaths were not identified in previous CSO reports since tests, such as PCR, were not used to confirm a diagnosis of influenza. Instead such deaths were recorded as respiratory deaths.

Suicides accounted for 421 deaths in 2019 and it is expected that there may be a substantial increase in those deaths due to the socioeconomic impact of the lockdowns.

...To give an overview of the relative numbers of deaths in the main IDC-10 causes, and to demonstrate how little they vary from year to year – thus having little effect on the 5-year average and on excess deaths – I have complied **Graph 3** below from the CSO's 2014-2019 Vital Statistics Annual Reports [see key on next page].

Graph 3



1	External causes of injury and poisoning	9	Diseases of the respiratory system
2	Symptoms, signs, abnormal findings, ill-defined causes	10	Diseases of the circulatory system
3	Congenital malformations and chromosomal abnormalities	11	Diseases of the nervous system
4	Certain conditions originating in the perinatal period	12	Mental and behavioural disorders
5	Diseases of the genitourinary system	13	Endocrine, nutritional and metabolic diseases
6	Diseases of musculoskeletal system and connective tissue	14	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
7	Diseases of the skin and subcutaneous tissue	15	Neoplasms [tumors/cancer]
8	Diseases of the digestive system	16	Infectious and parasitic diseases

Conclusion

By now the, mismatch that I have outlined between the NEPHET/data.gov.ie claimed COVID-19 deaths and the official GRO registered deaths up to June 2020, together with the RIP.ie cleaned death notices from then up to March 2021, can only bring you to the same conclusion that I have arrived at. That is, that **the NEPHET/data.gov.ie claimed COVID-19 deaths are deaths of older people and people with underlying conditions who died as per normal but were fraudulently classified as COVID-19 by vested interests using PCR tests which have found to produce a high percentage of false positive results.**

Furthermore, I conclude that the approximately 500 excess deaths in Jan-Feb 2021 must be related to the rollout of the vaccinations in those nursing homes during that period, and that the excessively high COVID-19 deaths claimed by NPHET/data.gov.ie in Jan-Feb 2021 are **contrived** for the sole purpose of allowing those deaths to be explained as COVID-19 deaths (as per the death records) **rather than adverse reactions to the vaccines.**

And finally, the health of a nation can be quickly assessed by looking at its trend death rates as quoted in deaths per 1,000 of population. I have prepared **Table 4** below from CSO annual reports, recent GRO updated data, and RIP.ie death notices for 2020. The table shows that **the 2020 death rate will be the lowest since 2012**, a clear indication that **there was no need for the mass hysteria created by vested interests.** This could not be challenged until now due to the lack of up-to-date data and transparent death data from the Central Statistics Office.

Table 4

	GRO / CSO								RIP.ie
Year	2012	2013	2014	2015	2016	2017	2018	2019	2020
Population x 1,000	4594	4615	4645	4688	4740	4793	4857	4922	4980
Deaths	29,186	29,504	29,252	30,805	31,351	31,115	31,695	31,282	31,276
Death Rate	6.35	6.39	6.30	6.57	6.61	6.49	6.53	6.36	6.28

References

All references are hyperlinked in blue in the report.

Author

Kieran Morrissey is a US born Engineer who has worked in healthcare for most of his career and have been educated and spent most of his life in Ireland. He is married with 4 adult children.

NOTE: The complete original version of this paper may be found at

<https://www.globalresearch.ca/study-covid-19-deaths/5742850>

For purposes of clarity we have omitted a few paragraphs and made some minor editorial changes. Highlighting has been added to draw attention to findings of particular interest.

We would urge all of our Irish readers to share this paper with friends and neighbors since it shows conclusively that our country is being controlled at this time by a very dangerous group of people. This group is being directed by an international consortium who are fully prepared to commit mass murder to achieve their political objectives.

APPENDIX B

Experience of a disabled Canadian woman flying back to Vancouver on 3 April, 2021

Source: Facebook, Virginia Pollock, 4 April 2021

https://www.facebook.com/permalink.php?story_fbid=2543508092621041&id=100008856257618

[See our paper #251 [November 2020] where we highlighted the future role of the Chinese military in controlling the civilian populations of ‘free’ countries during the coming takeover.]

I got home to Canada yesterday. I must tell you about the fresh hell I walked into after arriving in the Vancouver British Columbia Airport.

Our airplane flew into Vancouver from Seattle and we were immediately made to walk in a single file. There were no more than 30 of us. The airport was totally empty like a huge tomb. There were absolutely no people in offices or stores. There was a chilling effect to this great emptiness and quiet.

As we were walking in single file on either side along this chosen path were guards about every 20 feet keeping us contained on path. The guards were Chinese in Airport Security uniforms. I wanted to take a picture but I was sternly warned not to take any pictures. I asked if I may use the woman's facilities and having to go off path I was escorted by a Chinese woman in the uniform of the Airport Security. I have Chinese friends but this felt very different. It was unnerving coming back to my country to be made to file one after another with Chinese guards keeping us in line and directing us. After seeming to walk a mile we ended up at 3 Booths each with 2 Chinese guards. The top was surrounded by glass with a small cut to pass papers through. I had an emergency medical appointment due to an accident that effected my disability. I was in great pain and the Doctor was willing to see me for special circumstances. I had to come home immediately.

I was finally told by a guard to approach the booth and show my Covid Test(negative of course or I would not be allowed on the flight) . Then I saw behind the booth a long row of Canadian Policemen. A wall of Police.

The very young Chinese fellow at the booth said that he didn't care about my circumstances or disability but I could go along to the next two booths that had 2 white healthcare nurses in each booth.

I then spoke to a young lady whom I thought would allow me to get to my specialist. I was in a physically bad way was told to take a chair just in front of another group of Police. It was so intimidating to be there. It was the great number of guards and doubled by the police's presence. It was actually scary. I felt like I was in a kind of nightmare movie because it was unreal. There was something so militaristic yet undefined on the surface. The Canadian police were at attention with nothing to do. I felt like they were hoping for something to take away their boredom. I immediately felt like I was at their mercy.

After at least one hour, which felt like a week I was worried I would miss my special appointment. Of course I swore to uphold isolation and all the regulations like phoning in to report my isolation daily, because Canadians can't be trusted I guess I finally went to ask the nurse if I could leave. She told me that the very young Chinese guard in the first booth said that he didn't agree and I had to go to their choice of detention centre. I was floored and asked if she could do something. No the Chinese guard said no! The Canadian Health Canada nurse obviously got orders from him. Well. I was so shocked that I wasn't allowed my medical emergency care.

I said well I have to try and make my appointment because it was beginning to be painfully unbearable. All she said was that I could call for an ambulance see a paramedic and wait until my detention was over. I thought that a nurse would know that in cases of specialist treatment a paramedic is of no help.

I had to say I must leave and I'll deal with the consequences later. It's a \$3000.00 fine.

I grab my suitcase that was sitting alone outside the deserted luggage pick up and realized that 2 police men were on either side of me. They escorted me away from the exit to another row of people in a long booth. There were about 10 people manning whatever this was. I was brought up to a lady who said before you go you need the Covid test. I said yes. Let's do it please. Then she insisted I answer questions. At least the police man gave me a chair. I was going to miss my appointment for sure now.

The first thing this lady said after name address etc etc that was right on her computer was “ What Covid hotel are you booked at?” None. Please I really need to hurry. May I have my test. No. Then I actually began to cry. I just couldn’t help it. My pain and worry we’re building up. I calmed down and the lady said “ let’s continue “Now what Covid hotel are you going to ?” I said none. I got up to go to the testing tent. Then three police were around me. I was trapped and now I thought if I overreacted they are going to put me in a jail cell. I asked them” what’s going on?” If you don’t do what you are told we will take you to jail.” That was just too much. I sat back down and the lady asked me “ what Covid hotel are you booked in?” Again! Then I stood up and said please ticket me and let me go. Oh no. Then a male nurse with the three police came around me. He obviously saw I was in distress, shaking and sweating and I was on the verge of tears again. I’m not usually like this but I was in a bad way. This was just abusive now. So I have to answer the questions. I kid you not the lady said. “ ok now. What Covid hotel are you booked into?” Wow. Such abuse of power and contemptive behaviour!

I stood up and said. “Oh no you don’t. “And made my way to the test tent. There were about 10 Chinese women doing the tests. The nurse from the front was then there along with to two policemen shadowing me. I was finally led to a chair and a Chinese nurse swabbed my nose. I got up after thanking her very politely and made my way to go to the exit. Now the nurse and one officer escorted me then another officer came up while I was still not outside the roped in test area. I wasn’t sure if they weren’t going to take me down and off to jail. All of these police and Chinese guards and Chinese testers for small handfuls of people who all test negative coming home ! They must be assholes for doing the governments work especially when the real power lays with the 3 Chinese men in the first booth. It was plain to see that there was an incredible amount of “ hate” and distrust for anyone who dared leave our country when orders were to stay masked and locked up during Trudeaus great Communistic Power Play to prove to his Global Elites that he has his foot ready to squish anyone who dares not to be abused, used and punished in Trudeaus new FIRST POST NATIONAL STATE.

The nurse then said “ I have to give you instructions as she handed me a non compliance form. At this point I just laughed and said “ what are you doing here. You don’t make medical decisions you just sign off on what that young man tells you and he sure as heck isn’t a nurse or doctor. So you just abuse seniors who have disabilities! Just leave me alone. I shook them off and finally escaped from my first brush with a look at what the people in Canada are letting happen.

What country did I land in? Well that sure wasn't Canada. God only knows what we are in for. The Chinese run the place. What else are we not seeing. With the Chinese Communist Huawei G5 spy system up and running across our country now, installed during our first lockdown. Victoria is building a Chinese Museum honouring the Chinese and let's not forget about a little virus called Covid-19 that set all of these new communistic power moves in motion and the death of old useless seniors like me, I ask what next.

Chinese military dressed in UN peacekeeping attire



Are they shouting, 'Peace! Peace!?' – we doubt it.